

MODULE 22: TEACHING RESOURCES

Cognitive goals

At the completion of this module, the student-instructor should be able to:

- 22.1 Discuss the importance of mentors for the development of a professional EMS instructor
- 22.2 Discuss the importance of working with various allied health personnel, including State EMS agency personnel, area hospital personnel (ER physicians, nurses, respiratory therapists, pharmacists, etc), non-hospital affiliated physicians and area paramedic program faculty (e.g., college and university)
- 22.3 Discuss the importance of validity, utility and the effective use of resources in delivering content in a program
- 22.4 Discuss the importance of attending professional development opportunities (e.g., EMS and education conferences and workshops)
- 22.5 Discuss the usefulness of a library in developing educational content
- 22.6 Discuss the importance of research for each of the following:
 - When developed for a specific organizational need
 - Used when participating in larger multi-organizational projects
 - As a contribution to the body of knowledge
- 22.7 Discuss the importance of developing a support network with each of the following:
 - local political officers (e.g., county council, mayor, city manager)
 - physicians
 - publishers
 - area EMS instructors
 - area paramedic program faculty (e.g., college and university)
 - other faculty within your agency
- 22.8 Discuss the importance of using community service as a means of developing teaching skills
 - through presentations to public groups (e.g., scouts, schools, civic groups)
 - assisting with area EMS courses

Psychomotor goals

At the completion of this module, the student-instructor should be able to:

- 22.1 Given a specific EMS instructional setting (with audience, teaching site, and course type provided) the student-instructor should be able to take specific EMS course content resources (provided to them) and evaluate that resource for validity, utility and effectiveness in the described setting
- 22.2 Use the resources described in this module to enhance lesson plan content

Affective goals

At the completion of this module, the student-instructor should be able to:

- 22.1 Describe why it is important for EMS instructors to seek a mentor

- 22.2 Explain the importance of critical evaluation of teaching resources
- 22.3 Value the importance of developing methods designed to enhance personal growth and life-long learning

Declarative

- I. Why this module is important
 - A. One of the greatest challenges of an EMS instructor is finding high quality resources for teaching
 - B. A mentor is a valuable resources to any instructor, not just a novice one
 - 1. They can help direct your continuing personal and professional development
 - 2. They can serve as a resource for problem solving instructional issues
- II. The importance of mentoring in the development of EMS instructors
 - A. Mentors are an excellent resource for content and teaching methods and techniques
 - B. Mentors provide
 - 1. Guidance
 - 2. A good example to model yourself after
 - 3. Constructive criticism to help you grow (personally and professionally)
 - 4. Insight from their experiences
 - C. Mentors may be
 - 1. EMS educators
 - 2. Educators from other allied health fields
 - 3. Physicians
 - 4. Nurses
 - 5. Other healthcare professionals
 - a. Respiratory technicians, physical therapists, etc.
 - 6. Educators from other academic settings
 - a. Colleges of education
 - b. Programs specializing in rescue, fire and law enforcement
 - 7. Other individuals
 - D. Where to find mentors
 - 1. Mentors can come from a variety of fields, not just EMS or allied health (politicians, clergy, business leaders, lawyers, managers, etc)
 - a. The key is that they are truly concerned with the success of the student and with your development as an instructor
 - 2. Do not limit your opportunities to grow and develop, pick mentors from the political, administrative, legal, financial or other fields
- III. Media as a resource
 - A. Media takes many forms and comes in many price ranges
 - 1. Expensive is not necessarily better
 - B. Add a variety of media to your presentations to keep students interested and to maximize various student learning styles and preferences
 - C. Media should be evaluated to determine that it is:

1. Appropriate for the audience
 2. Professionally presented
 3. Targeting students reading and comprehension levels
 4. Covering an appropriate depth of information
 5. Accurate
 6. Containing current information, including trends and updates
 7. Promoting good behavior and practices in students (example: wearing gloves while attending to patients)
 8. Easy to use
- D. Determine what you need to use the selected media
1. Computers, overheads, white boards, etc.
 2. It should fit well into the environment you will use it in
 3. If it malfunctions, can you fix it quickly?
 4. Do you have a back-up plan in case of problems?
- E. Media should be defensible and credible
1. From refereed journal or a peer-reviewed Internet site
 2. Do not assume because it was commercially prepared that it is designed well or the content is accurate
 - a. Closely scrutinize any media before you use it
- IV. Conferences, workshops and continuing professional development opportunities
- A. Current science is reviewed or presented
 - B. Expanding your background knowledge
 - C. Teaching methodology and pedagogy is presented
 - D. Observing others teach helps you teach better
 - E. Sharing tips, ideas and techniques
 - F. Opportunities for networking (building support groups)
 - G. Exposure to vendors who present new products
 1. Often they provide free samples of merchandise or books
 2. They may have training materials (models, or content) for you to use in your courses
 3. Opportunities to maintain your own certification as a provider as well as enhance your instructor abilities
- V. The library as a resource
- A. Public
 1. Generally easily accessible
 2. Often will have free access to a limited sample of medical databases
 3. May offer some technical support for performing on-line and non on-line information searches
 4. Generally found in most communities
 - B. Academic based (college or university)
 1. May have content specific materials and access to more scientific material than a public library
 2. May have more liberal hours of operation (especially during finals week)

3. Medical school libraries have large collections of allied health materials as well
 4. Will have staff who specialize in research strategies
 5. May require users to be affiliated with the institution
 6. Computerized databases offered within standing libraries or via the Internet
 - C. General databases: CINAHL, NEXUS/LEXUS, etc.
 1. Databases are available in both public and private libraries
 2. Educational focused: ERIC, etc.
 3. Medical focused: MEDLINE, Greatful Med, etc.
 4. Many have free Internet access
 5. Many offer free or inexpensive resources
 6. May have links with other libraries for borrowing materials
 - a. May be available to be used as a test-proctoring site
 - b. May provide free or low cost interlibrary loan system
 - c. Often contain archived material
- VI. Research as a resource
- A. Access to and opportunities for research are critical to the development of the EMS profession
 - B. Research is considered one aspect of professional growth and development
 - C. Research can be done to address a specific need for an organization (e.g., intubation success, on-scene times, etc.)
 - D. Once completed a problem may be solved, a process changed, or training program developed
 - E. It may be done in collaboration with other institutions to address a profession-wide issue (e.g., effectiveness of teaching EKG via distance learning for paramedic students)
 - F. It provides a basis for further study and future projects
 - G. It helps us demonstrate our value to the medical community
- VII. The value of professional groups for EMS instructors
- A. Provide mentoring and support for other instructors
 - B. Provide access to guidance when dealing with political issues (e.g., county funding for a certification course)
 - C. Provide examples of excellent teaching
- VIII. Organizations and groups that are potential sources of information
- A. American Society for Testing and Materials (ASTM)
 1. This organization develops standards
 - B. Department of Labor
 1. EMS task analysis
 2. Some standards and guidelines
 3. Curricula
 - C. Department of Energy
 1. Curricula: transportation of hazardous materials and radioactive materials
 - D. Centers for Disease Control

1. For infectious disease (ID) curricula materials
 2. Many provided as text, PowerPoint® and Adobe Acrobat® files as free non-copyrighted materials
 3. Email listservers provide access to updated reports and news items free of charge
- E. Occupational Safety and Health Administration
1. For ID and worker safety standards and guidelines
 2. Curricula
- F. Federal Emergency Management Agency
1. Standards and guidelines
 2. Curricula: disaster management, mass casualty, etc.
- G. Department of Transportation: National Highway Traffic Safety Administration (NHTSA)
1. National Standard Curricula for all levels of EMS provider including refresher training and instructor training curricula
 2. Many resources provided as text, brochures and computer based presentations
 3. Many provided free of charge
- H. US Department of Health and Human Services
1. Pediatric curricula
 2. Family support services materials
 3. General health data and epidemiological resources
- I. Emergency Medical Services for Children
1. Pediatric curricula (PEPP and others)
 2. National clearinghouse for pediatric resources
 3. Many resources provided as text, brochures and computer based presentations
 4. Many provided free of charge
- J. National Registry of EMTs
1. Private organization that is a national licensing body for EMS that many states participate in
 2. Practical skills sheets that detail many EMS skills
 3. Available on-line free of charge
 4. Practice tests (computerized and “correspondence type”)
- IX. Allies or mentors may be found within other public service agencies
- A. Fire service based
1. National Fire Academy
 2. International Fire Service Training Instructors
- B. Police based
1. NFPA
- X. National EMS professional associations
- A. NAEMT
- B. Unions accepting EMS workers
- C. National EMS educational organizations
1. NAEMSE
 2. Sub-groups within other EMS organizations

- XI. Groups focusing on EMS administration
 - A. NASEMSTC
 - B. National EMS State Directors
 - C. AAA – American Ambulance Association

- XII. Other groups that may be useful sources of information
 - A. Physician based groups
 - B. Nursing and allied health groups with EMS focus
 - C. Individual state EMS educators' association

- XIII. Groups with established training programs (continuing education)
 - A. AHA: ACLS, BCLS, PALS, AED
 - B. ARC: BLS, AED
 - C. ATLS
 - D. BTLS International: BTLS, PBTLS, Access
 - E. Wilderness Medic
 - F. Farmedic
 - G. AMLS
 - H. PHTLS (including combat Medic module)
 - I. Pediatric Education for Prehospital Professionals (PEPP)
 - J. Traumatic Brain Injury Program
 - K. Other programs also exist and more are being added all the time
 - 1. Many of these programs, or parts of these programs may be available for you to use even if you are not offering the course for certification

- XIV. Accrediting bodies
 - A. CAAHEP – Commission for the Accreditation of Allied Health Education Programs
 - B. CoAEMSP – Committee on Accreditation of EMS Programs
 - C. CECBEMS – Continuing Education Coordination Board for EMS
 - D. College and university accrediting boards and groups
 - 1. Accreditation for Internet based programs and schools
 - a. Scrutinize these groups closely to determine who they are
 - b. College and university accrediting bodies may know of these groups

- XV. Internet based resources
 - A. Evaluate site for bias, quality, and age of the material
 - B. List of Internet addresses with free resources (attachment 3)

- XVI. Medical and EMS trade journals and magazines
 - A. Peer reviewed is generally the most scientific
 - 1. Many are devoted to sub-specialties of EMS like rescue, administration, legal issues, etc

 - B. Continuing education resources

1. Refer to previous list
 2. CECBEMS is one of several organizations that accredits continuing education offerings by organizations
 3. State EMS agency may have a process or standard in place for quality assurance
- XVII. Refresher training
- A. NREMT has a standard in place that many states follow
 - B. Publishers of EMS and health related materials have resources
 - C. Test banks - may be provided when an institution purchases a large volume of texts
 - D. Instructor resource guides - often include lesson plans, outlines, lecture aids (e.g., computerized presentations, handouts, overheads, etc.)
- XVIII. Skill sheets
- A. May accompany textbooks
 - B. Downloadable from some websites (e.g., NREMT)
- XIX. Computerized and multimedia resources
- A. Realistic looking and reacting manikins
 - B. Videotapes
 - C. Audiotapes
 - D. CD-Rom, DVD, and other technology based programs with case studies, simulations, games, and learning content
- XX. Moulage kits
- A. Available from medical appliance manufacturers
 - B. Build your own
 - C. Keep an eye out for old clothes, toys and discarded items to use in your own kit
 - D. Yard and garage sales, and thrift shops
 - E. Buy make-up from a clearance bin or after holidays like Halloween when it is significantly marked down
 - F. Attend a class on theatrical make-up or moulage techniques
 - G. Develop a relationship with a local theatre group
 - H. Local mortuary may be a resource for make-up and a make-up artist
- XXI. Your medical director is one of your best resources
- A. He or she should be involved in your program and course design and development
 - B. He or she should be visiting regularly with your students
 - C. He or she may also be called upon to teach in your program, but remember, being a medical director does not mean instructional ability
- XXII. Other faculty members in your program
- A. A team approach leads to the best students
 - B. Other instructors help solve problems and may have a better perspective on an issue

- C. They may have resources to share or teaching tips and tricks
- XXIII. Your clinical preceptors as a resource
- A. The integration of the clinical aspects of your program with the didactic is critical to a successful program
 - B. Provide preceptors with a written feedback tool
 - C. Use preceptors' opinions as a measure of the success of the delivery of content
 - D. Invite preceptors to participate in meetings and decision making
 - E. Affective domain evaluations on students should be completed by preceptors
- XXIV. Your program advisory board
- A. You may have access to the members of your program's advisory board (or some other group of individuals who have been brought together to provide guidance to your program)
 - B. These individuals are generally representing groups and agencies that work closely with your students
 - C. They can be valuable sources of information for you as you plan instruction or can provide feedback on how your students are performing on the job
 - D. This group should meet at least annually to review the success of the program (e.g., review testing results) and should recommend curriculum changes when appropriate
- XXV. Graduated students and communities of interest surveys
- A. Surveys allow graduates to provide anonymous feedback about the program
 - 1. Did the program adequately prepare them for testing and working as a Paramedic?
 - B. Surveys of EMS agencies in your service area allow employers to provide anonymous feedback about interns and graduates now employed by them
- XXVI. The role of community service in professional development
- A. Fulfills the mission of the EMS Agenda for the Future
 - B. Provides public education on injury prevention
 - C. Providing presentations to public groups allows you to hone your presentation skills in a less threatening environment than the EMS classroom
 - 1. Provides growth opportunities for students as well
 - D. Provides an opportunity to educate the public about our mission
 - E. Helps us develop or maintain a positive image with the public
 - F. You have the opportunity to "give something back" to the EMS community when you volunteer to help out at an EMS course
 - G. May develop new markets for EMS by making the public aware of the depth and breadth of knowledge in EMS